### Case 16-10366 Doc 1 Filed 03/25/16 Entered 03/25/16 15:32:07 Desc Main Document Page 1 of 60

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for	Matthew First name		Leslie First name		
	example, your driver's license or passport).	Middle name		Renee Middle name		
	Bring your picture identification to your meeting with the trustee.	Hendrix Last name and Suffix (Sr., Jr., II, III)		Hendrix Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years					
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6388		xxx-xx-9326		

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Debtor 1 Matthew Hendrix
Debtor 2 Leslie Renee Hendrix

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	I have not used any business name or EINs.  Business name(s)  EINs			
5.	Where you live	4843 W. Hutchinson	If Debtor 2 lives at a different address:			
		Chicago, IL 60641  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
	County		County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 **Matthew Hendrix** Debtor 2 Leslie Renee Hendrix Case number (if known) Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay П The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? □ Yes. When District Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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Den	Lesile Renee Hen	arıx			Case number (if known)			
Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	■ No. Go to Part 4.					
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code			
	it to this petition.		Check	the appropriate bo	ox to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you in	dicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am n	ot filing under Chap	pter 11.			
	business debtor, see 11 U.S.C. § 101(51D).		I am fi Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and	☐ res.	What is t	he hazard?				
	identifiable hazard to public health or safety?							
	Or do you own any		If immed	iata attantian ia				
	property that needs immediate attention?			iate attention is why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?								
					Number, Street, City, State & Zip Code			

Debtor 1 Matthew Hendrix

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Debtor 1 Matthew Hendrix
Debtor 2 Leslie Renee Hendrix

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-10366 Doc 1 Filed 03/25/16 Entered 03/25/16 15:32:07 Desc Main Document Page 6 of 60

Debtor 1 **Matthew Hendrix** Debtor 2 Leslie Renee Hendrix Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **25,001-50,000** 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$500,000,001 - \$1 billion **\$0 - \$50,000** □ \$1,000,001 - \$10 million estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Matthew Hendrix /s/ Leslie Renee Hendrix **Matthew Hendrix** Leslie Renee Hendrix Signature of Debtor 1 Signature of Debtor 2 Executed on March 16, 2016 Executed on March 16, 2016 MM / DD / YYYY MM / DD / YYYY

Page 7 of 60 Document Debtor 1 **Matthew Hendrix** Debtor 2 Leslie Renee Hendrix Case number (if known) For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter represented by one for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) If you are not represented by and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the an attorney, you do not need schedules filed with the petition is incorrect. to file this page. /s/ Elyssa M Pavone ARDC # Date March 16, 2016 Signature of Attorney for Debtor MM / DD / YYYY Elyssa M Pavone ARDC # Printed name Ledford, Wu & Borges, LLC Firm name 105 W. Madison 23rd Floor Chicago, IL 60602

Email address

notice@billbusters.com

Number, Street, City, State & ZIP Code

Contact phone **312-853-0200** 

Bar number & State

Debtor 1	Matthew Hendrix					
	First Name	Middle Name	Last Name			
Debtor 2 Leslie Renee Hendrix						
Spouse if, filing)	First Name	Middle Name	Last Name			
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			

☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,275.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	8,275.00
Par	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	2,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	61,218.75
	Your total liabilities	\$	63,218.75
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,787.67
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,755.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
	■ Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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	Matthew mendrix			
Debtor 2	Leslie Renee Hendrix	Case number (if known)		
			ſ	

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,556.42

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
, I, J		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	5,517.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	5,517.00

		Document	Page 10 of 60		
Fill in this infor	mation to identify your case a	nd this filing:			
Debtor 1	Matthew Hendrix				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	Leslie Renee Hendrix First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the: NORT	HERN DISTRICT OF ILLIN	NOIS		
Case number			-		Check if this is an amended filing
					amenaca ming
Official Ec	orm 106A/B				
_		•			
	le A/B: Property	<u> </u>			12/15
hink it fits best. If more and a first the fir	separately list and describe items. Be as complete and accurate as po re space is needed, attach a separ stion.	essible. If two married people ate sheet to this form. On the	e are filing together, both are e top of any additional pages	equally responsible for sup	plying correct
Do you own or	have any legal or equitable interes	st in any residence, building,	land, or similar property?		
No. Go to Pa	rt 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
□ No ■ Yes					
3.1 Make:	Chevy	Who has an interest in the	e property? Check one	Do not deduct secured cla	
Model:	Trailblazer	Debtor 1 only		the amount of any secured Creditors Who Have Clain	
Year:	2006	Debtor 2 only		Current value of the	Current value of the
	te mileage: 115000	Debtor 1 and Debtor 2 o	•	entire property?	portion you own?
Other infor	ased on NADA average	☐ At least one of the debto	ors and another		
trade-in	_	Check if this is commu	unity property	\$4,725.00	\$4,725.00
		(coo mon denone)			
3.2 Make:	Dodge	Who has an interest in the	e property? Check one	Do not deduct secured cla	
_	Caravan	Debtor 1 only		the amount of any secured Creditors Who Have Clain	
Year:	2004	Debtor 2 only		Current value of the	Current value of the
	te mileage: 176000	Debtor 1 and Debtor 2 of		entire property?	portion you own?
Other infor		☐ At least one of the debto	ors and another		
nada	Trade-in value per	Check if this is commu	unity property	\$650.00	\$650.00
	ircraft, motor homes, ATVs an ats, trailers, motors, personal wa				

Official Form 106A/B Schedule A/B: Property page 1

5.1.	Mattham Hay 12	Document Page 11 o	† 60	
Debtor 1 Debtor 2	Matthew Hendrix Leslie Renee Hendrix		Case number (if known)	
		own for all of your entries from Part 2, incluite that number here		\$5,375.00
Part 3: De	scribe Your Personal and Househol	d Items		
		interest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
<i>Exampl</i> □ No □	old goods and furnishings es: Major appliances, furniture, line	ens, china, kitchenware		ciains of exemptions.
■ Yes.	Describe  1 Sofa, 1 mic	rowave, 2 beds, 10 pots and PANS.		\$1,800.00
□ No		video, stereo, and digital equipment; computers, media players, games	s, printers, scanners; music col	lections; electronic devices
	1 television,	2 dvd players, 2 cell phones		\$800.00
Example No Yes.  Property No Yes.  Requipm Example No Yes.  Property No The No	other collections, memorabilia,  Describe  ent for sports and hobbies es: Sports, photographic, exercise musical instruments  Describe	, and other hobby equipment; bicycles, pool tab		
11. <b>Clothe</b> Examp  □ No		er coats, designer wear, shoes, accessories		
	Personal Use	ed Clothing		\$300.00
■ No		welry, engagement rings, wedding rings, heirlo	om jewelry, watches, gems, go	ld, silver
_Exam <sub> </sub>	rm animals bles: Dogs, cats, birds, horses			
■ No □ Yes.	Describe			
■ No		ns you did not already list, including any he	alth aids you did not list	
☐ Yes. Official Forr	Give specific information m 106A/B	Schedule A/B: Property		page

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Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No Institution name or individual: ☐ Yes. .....

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Case 16-10366 Doc 1 Filed 03/25/16 Entered 03/25/16 15:32:07 Desc Main Document Page 13 of 60 Debtor 1 **Matthew Hendrix** Debtor 2 Leslie Renee Hendrix Case number (if known) Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information...

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ No

Yes. Describe each claim.......

Potential Personal Injury Lawsuit due to car accident

Unknown

Page 14 of 60 Document Debtor 1 **Matthew Hendrix** Debtor 2 Leslie Renee Hendrix Case number (if known) 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$0.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$5,375.00 57. Part 3: Total personal and household items, line 15 \$2,900.00 58. Part 4: Total financial assets, line 36 \$0.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$8,275.00 Copy personal property total \$8,275.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$8,275.00

Official Form 106A/B Schedule A/B: Property page 5

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Desc Main

		DOM:	111 1 1000 13 01 00	
Fill in this infor	mation to identify your	case:		
Debtor 1	Matthew Hendrix			
	First Name	Middle Name	Last Name	
Debtor 2	Leslie Renee Her	ndrix		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is a
()				amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2006 Chevy Trailblazer 115000 miles Value based on NADA average	\$4,725.00		\$4,725.00	735 ILCS 5/12-1001(c)
trade-in value Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2004 Dodge Caravan 176000 miles Average Trade-in value per nada	\$650.00		\$0.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
1 Sofa, 1 microwave, 2 beds, 10 pots and PANS.	\$1,800.00	•	\$1,800.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
1 television, 2 dvd players, 2 cell	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Personal Used Clothing	\$300.00		\$300.00	735 ILCS 5/12-1001(a)
Ellio Ilolli Goriodalo 77 D. 1111		_		

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Matthew Hendrix

De	Lesile Renee Hendrix			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash on Hand Line from Schedule A/B: 16.1	\$0.00		\$0.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	Checking Account: Citibank Line from Schedule A/B: 18.1	\$0.00		\$0.00	735 ILCS 5/12-1001(b)
	Line Iron Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Son's Checking Account with TCF	\$0.00		\$0.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 18.2			100% of fair market value, up to any applicable statutory limit	
	Potential Personal Injury Lawsuit due to car accident	Unknown		\$30,000.00	735 ILCS 5/12-1001(h)(4)
	Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 No			led on or after the date of adjustmer	t.)
	☐ Yes. Did you acquire the property covere	d by the exemption wi	ithin 1	,215 days before you filed this case	
	∐ No				

Debtor 1

Fill in this information to ident	ify your ooos	Document	Page 17	7 of 60			
Fill in this information to ident							
Debtor 1 Matthew First Name	lendrix	Middle Name	Last Name				
	ee Hendrix	Middle Name	Last Name				
(Spouse if, filing) First Name	ice Hellalix	Middle Name	Last Name				
United States Bankruptcy Court	or the: NO	RTHERN DISTRICT OF IL	LINOIS				
0							
Case number					Г	7 Check	if this is an
					_	_	ded filing
			,				_
Official Form 106D							
Schedule D: Credi	tors Who	Have Claims	Secure	d by Propert	У		12/15
Be as complete and accurate as possible as complete and accurate as possible and accurate accurate as possible and accurate accu	e, fill it out, num	ber the entries, and attach it					
. Do any creditors have claims sec		• •				. ,	
No. Check this box and su		to the court with your othe	r schedules. Y	ou have nothing else t	o report on th	is form.	
Yes. Fill in all of the information	nation below.						
Part 1: List All Secured Clai	ms						
<ol><li>List all secured claims. If a credit for each claim. If more than one cred much as possible, list the claims in al</li></ol>	itor has a particu	ılar claim, list the other credito	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of coll that support claim		Column C Unsecured portion If any
2.1 Turner Acceptance	Descri	be the property that secures	the claim:	\$2,000.00		650.00	\$1,350.00
Creditor's Name		Dodge Caravan 17600 age Trade-in value per					
4450 N. Western Ave,.		he date you file, the claim is:	Check all that				
Chicago, IL 60625	apply.	ntingent					
Number, Street, City, State & Zip Co		quidated					
	☐ Disp						
Who owes the debt? Check one.	Nature	of lien. Check all that apply.					
Debtor 1 only		agreement you made (such as · loan)	mortgage or se	cured			
Debtor 2 only	_	,					
Debtor 1 and Debtor 2 only	_	tutory lien (such as tax lien, me	ecnanic's lien)				
At least one of the debtors and ar	_	gment lien from a lawsuit	Lien on ve	hiolo			
☐ Check if this claim relates to a community debt	Oth	er (including a right to offset)	Lien on ve	nicie			
Date debt was incurred		Last 4 digits of account num	nber				
Add the dollar value of your entri	es in Column A	on this page. Write that nun	nber here:	\$2,00	00.00		
•		r value totals from all pages		\$2,00			

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

C	ase 10-10300 L	Document	Page 18 of 60	Desc Main
Fill in this info	rmation to identify your			
Debtor 1	Matthew Hendrix			
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2	Leslie Renee Hen	ndrix		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For	m 106E/E			
		/ha Haya Haasayrad	Claima	12/15
		/ho Have Unsecured	Y claims and Part 2 for creditors with NONPRIOR	
eft. Attach the Coname and case n		ge. If you have no information to rep	needed, copy the Part you need, fill it out, numb port in a Part, do not file that Part. On the top of	
1. Do any cred	itors have priority unsecure	ed claims against you?		
■ No. Go to	Part 2.			
☐ Yes.				
	All of Your NONPRIORIT	TY Unsecured Claims		
3. Do any cred	itors have nonpriority unsec	cured claims against you?		
□ No. You h	nave nothing to report in this p	part. Submit this form to the court with	vour other schedules.	
Yes.			,	
unsecured cl	aim, list the creditor separately	y for each claim. For each claim listed	e creditor who holds each claim. If a creditor has l, identify what type of claim it is. Do not list claims a nave more than three nonpriority unsecured claims f	Iready included in Part 1. If more
T GIT Z.				Total claim
4.1 1st Lo	an Financial	Last 4 digits of acc	ount number	\$360.00
12601	rity Creditor's Name S. Western Avenue sland, IL 60406	When was the debt	incurred?	
	Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply	
Who inc	curred the debt? Check one.			
☐ Debt	or 1 only	☐ Contingent		
☐ Debt	or 2 only	☐ Unliquidated		
Debt	or 1 and Debtor 2 only	☐ Disputed		
☐ At le	ast one of the debtors and and	other Type of NONPRIOR	ITY unsecured claim:	
☐ Che	ck if this claim is for a comi	munity		
debt	aim subject to offset?	Obligations arisin report as priority clai	ng out of a separation agreement or divorce that you	did not
■ No	ann subject to onset?		or profit-sharing plans, and other similar debts	
■ No		Other. Specify		
<b>∟</b> Yes		Other Specify	rayuay Luaii	

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Alliant Credit  Nemproony Cresisis Name P.C. Box 60505 City Of Industry, CA 91716 Instrute Street Cry State 2 Code Who Incurred the debt? Creck one.    Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor		Matthew Hendrix Leslie Renee Hendrix	Case number (if know)	
Nonproting Creditor's Name P.O. box 80050 City Of Inclustry, CA 91716 Number Street City State 2 fb Code Who Incurred the debt? Check one.	4.2	Alliant Credit	Last 4 digits of account number	\$676.00
Number Street City State Zip Code   No incurred the debt? Check one.   Debtor 1 only   Uniquicitated   Disputed   Debtor 2 only   Uniquicitated   Debtor 1 and Debtor 2 only   Uniquicitated   Disputed   Debtor 1 and Debtor 2 only   Uniquicitated   Disputed   Debtor 1 and Debtor 2 only   Uniquicitated   Debtor 1 and Debtor 2 only   Uniquicitated   Debtor 2 only		P.O. box 60050	When was the debt incurred?	· ·
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another check if this claim is for a community debt is the claim subject to offset? No Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 on	-	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Debtor 2 only		☐ Debtor 1 only	☐ Contingent	
Debtor 1 and Debtor 2 only		☐ Debtor 2 only		
Check if this claim is for a community debt   Check is the claim subject to offset?   Contingent   Check is this claim is for a community   Contingent   Check is this claim is for a community   Check is the claim subject to offset?   Check is the claim contingent   Check is this claim is for a community   Check is the claim contingent   Check is this claim is for a community   Check is the claim contingent   Check is this claim is for a community   Check is the claim contingent   Check is this claim is for a community   Check is the claim contingent   Check is the claim continge		■ Debtor 1 and Debtor 2 only		
Creek in this claim is to a community debt   Services/Fir   No   Debtor 1 only   Debtor 2 only   Debtor 1 spriority Creditor's Name   Check if this claim subject to offset?   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 6 only   Debtor 8 only   Debtor 8 only   Debtor 8 only   Debtor 9 only   Debtor 1 only		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Is the claim subject to offset?  No Poss Possion or profit-sharing plans, and other similar debts Payday Loan    Comment   Com		☐ Check if this claim is for a community	☐ Student loans	
Average American Web Loan Nonpriority Creditor's Name 210 Johngleen Dr. St. 14 Buffalo, NY 14228 Number Street City State Zip Code Who incurred the debt? Check one.    Debtor 1 and pettor 2 only   Unliquidated				
American Web Loan Nonpriority Creditor's Name 210 Johngleen Dr. St. 14 Buffalo, NY 14228 Number Street City State Zip Code Who incurred the debt? Check one.   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Disputed   Type of NONPRIORITY unsecured claim:   Check if this claim is for a community debt     No   Yes   Argent Healthcare Financial Services/Fir Nonpriority Creditor's Name Attn: Bankruptcy 7715 Nw 48th Street; Ste 100 Doral, FL 33166 Number Street City State Zip Code Who incurred the debt? Check one.   Debtor 1 and Debtor 2 only   Disputed   Other. Specify Payday Loan   Argent Healthcare Financial Services/Fir Nonpriority Creditor's Name Attn: Bankruptcy 7715 Nw 48th Street; Ste 100 Doral, FL 33166 Number Street City State Zip Code Who incurred the debt? Check one.   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Disputed   Debtor 1 and Debtor 3 only   Disputed   Disputed     Disputed   Disputed   Disputed   Disputed     Disputed   Disputed   Disputed     Disputed   Disputed   Disputed   Disputed     Disputed   Disputed   Disputed   Disputed     Disputed   Disputed   Disputed   Disputed   Disputed     Disputed   D		■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Nonprority Creditor's Name 210 Johngleen Dr. St. 14 Buffalo, NY 14228 Number Street City State Zip Code Who incurred the debt? Check one.   Debtor 1 only   Check if this claim is for a community debt   Services/Fir Nonprority Creditor's Name Attn: Bankruptcy 715 Nw 48th Street; Ste 100 Doral, FL 33166 Number Street City State Zip Code Who incurred the debtors and another   Check if this claim is for a community debt   Contingent		Yes	Other. Specify Payday Loan	
August 210 Johngleen Dr. St. 14   Buffalo, NY 14228   As of the date you file, the claim is: Check all that apply	I		Last 4 digits of account number 6588	\$676.00
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 at least one of the debtors and another Debtor 5 community Debtor 5 community Debtor 6 community Debtor 7 community Debtor 7 community Debtor 8 community Debtor 8 community Debtor 9 community Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 1 community Debtor 1 com		210 Johngleen Dr. St. 14	When was the debt incurred?	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Street City State Zip Code Who incurred the debtor Street City State Zip Code Who incurred the debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Doral, FL 33166 Number Street City State Zip Code Who incurred the debtors and another Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only	-		As of the date you file, the claim is: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts  Argent Healthcare Financial Services/Fir Nopriority Creditor's Name Attn: Bankruptcy 7715 Nw 48th Street; Ste 100 Doral, FL 33166 Number Street City State Zip Code Who incurred the debt? Check one. Debts 1 and Debtor 2 only Debts 1 and Debtor 2 only Debts 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Very Payday Loan  Last 4 digits of account number 5481  Last 4 digits of account number 5481  S405.00  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts		_		
Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  No  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Oblets to pension or profit-sharing plans, and other similar debts  Atgent Healthcare Financial Services/Fir Nonpriority Creditor's Name Attn: Bankruptcy 7715 Nw 48th Street; Ste 100 Doral, FL 33166 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 debtors and another Check if this claim is for a community debt Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 1 only Debtor 4 only Debtor 9 only De		_	☐ Contingent	
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims    No		☐ Debtor 2 only	☐ Unliquidated	
Check if this claim is for a community debt   Contingent     Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Check if this claim is for a community debt   Sthe claim subject to offset?     No   Debtor 1 and Debtor 2 only   Check if this claim is for a community debt   Sthe claim subject to offset?     No   Debtor 1 only   Debtor 1 and Debtor 2 only   Check if this claim is for a community debt   Sthe claim subject to offset?     No   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 6 only   Debtor 7 only   Debtor 8 only   Debtor 9 only		■ Debtor 1 and Debtor 2 only	·	
debt Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts Payday Loan  Argent Healthcare Financial Services/Fir Non Doral, FL 33166 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check iff this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts  Payday Loan  Last 4 digits of account number  5481  \$405.00  \$405.		lacksquare At least one of the debtors and another		
Is the claim subject to offset?    No				
Argent Healthcare Financial Services/Fir Nonpriority Creditor's Name Attn: Bankruptcy 7715 Nw 48th Street; Ste 100 Doral, FL 33166 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No  Other. Specify Payday Loan  Last 4 digits of account number 5481  S405.00  When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
Argent Healthcare Financial Services/Fir Nonpriority Creditor's Name Attn: Bankruptcy 7715 Nw 48th Street; Ste 100 Doral, FL 33166 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No  Argent Healthcare Financial Services/Fir Last 4 digits of account number S481  \$405.00		■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Attn: Bankruptcy 7715 Nw 48th Street; Ste 100 Doral, FL 33166 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Contingent Debtor 2 only Disputed At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  No  Debts to pension or profit-sharing plans, and other similar debts  48405.00  \$405.00 \$		Yes	■ Other. Specify Payday Loan	
Attn: Bankruptcy 7715 Nw 48th Street; Ste 100 Doral, FL 33166  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No When was the debt incurred?  Men was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	4.4	Services/Fir	Last 4 digits of account number 5481	\$405.00
Number Street City State ZIp Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		Attn: Bankruptcy 7715 Nw 48th Street; Ste 100	When was the debt incurred?	
Who incurred the debt? Check one.  □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Student loans □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	-		As of the date you file the claim is: Check all that apply	
■ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			76 of the date you me, the drain is. Oncok an that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 only	☐ Contingent	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		■ Debtor 2 only		
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_		
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts			•	
debt  Is the claim subject to offset?  ■ No  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		_	☐ Student loans	
		debt		
		■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
— Total Control Specify of Odicor Education Corp		☐ Yes	■ Other. Specify 07 Career Education Corp	

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Leslie Renee Hendrix		Case number (if know)	
AT&T	Last 4 digits of account number		\$900.00
Nonpriority Creditor's Name PO Box 806 Norwell, MA 02061-0806	When was the debt incurred?		·
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Utility		
Capital One	Last 4 digits of account number	8984	\$521.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 8/01/07 Last Active 6/22/12	
Salt Lake City, UT 84130  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Credit Care	<u> </u>	
Central Credit Service	Last 4 digits of account number	8389	\$406.00
Nonpriority Creditor's Name 9550 Regency Square Blvd Jacksonville, FL 32225	When was the debt incurred?	Opened 7/01/15	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Unilquidated ☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other Specify Collection	Attorney Sbc - Tinley Park	
50	- Other. Specify		

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Debtor Debtor	1 Matthew Hendrix 2 Leslie Renee Hendrix		Case number (if know)				
4.8	Charter Fitness Nonpriority Creditor's Name	Last 4 digits of account number		\$200.00			
	4743 W. 95th Street Oak Lawn, IL 60453	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	or plans, and other similar debts				
		, ,					
	Yes	Other. Specify gym memb	ersnip				
4.9	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	6227	\$171.00			
	Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 4/01/08 Last Active 5/26/11				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	,	and a series of the series of				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	og plans, and other similar debts				
	Yes	■ Other. Specify Credit Card					
44							
0	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	3492	\$500.00			
	Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 4/19/08 Last Active 12/08/09				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other Specify Credit Card					
		,					

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2 Leslie Renee Hendrix	Case number (if know)			
			44 = 22 22	
Check & Go	Last 4 digits of account number		\$1,500.00	
Nonpriority Creditor's Name 18240 Kedzie	When was the debt incurred?			
Hazel Crest, IL 60429				
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
☐ Yes	■ Other. Specify Payday Ioa			
ComEd	Last 4 digits of account number		\$900.00	
Nonpriority Creditor's Name 3 Lincoln Center	When was the debt incurred?			
Attn: Bkcy Group-Claims	when was the dept incurred:			
Department				
Oakbrook Terrace, IL 60181	_			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.  ☐ Debtor 1 only	_			
_ ′	Contingent			
Debtor 2 only	Unliquidated			
■ Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharin	g plans, and other similar debts		
Yes		g plane, and early earling desce		
□ Yes	Other. Specify Utilities			
Credit One Bank Na	Last 4 digits of account number	4736	\$655.00	
Nonpriority Creditor's Name				
Po Box 98873	When was the debt incurred?	Opened 11/01/07 Last Active 11/19/10		
Las Vegas, NV 89193	_			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims	3		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
☐ Yes	■ Other. Specify Credit Card	I		

Debtor 1 Matthew Hendrix

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	Leslie Renee Hendrix		Case number (if know)	
4.1	First Premier Bank	Last 4 digits of account number	6507	\$462.00
	Nonpriority Creditor's Name  3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	Opened 12/01/13 Last Active 6/27/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	IC Systems, Inc	Last 4 digits of account number	1001	\$2,413.00
	Nonpriority Creditor's Name 444 Highway 96 East Po Box 64378	When was the debt incurred?	Opened 4/01/12	
	St Paul, MN 55164  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection Centers	Attorney Kindercare Learning	
4.1	Illinois Collection Se	Last 4 digits of account number	7558	\$490.00
	Nonpriority Creditor's Name 8231 185th St Ste 100 Tinley Park, IL 60487	When was the debt incurred?	Opened 3/01/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	••	
	☐ Yes	Other. Specify Collection	Attorney Pems	

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Debtor Debtor	Matthew Hendrix Leslie Renee Hendrix		Case number (if know)	
4.1	IST Loan	Last 4 digits of account number		\$313.75
<u>.</u>	Nonpriority Creditor's Name 12601 Western Ave	When was the debt incurred?		
-	Blue Island, IL 60406  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Payday Loa	<u>ın</u>	
4.1	Jefferson Capital Systems, LLC	Last 4 digits of account number	7003	\$1,910.00
	Nonpriority Creditor's Name 16 Mcleland Rd Saint Cloud, MN 56303	When was the debt incurred?	Opened 3/01/15	
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Factoring ( Other. Specify Wireless	Company Account Verizon	
4.1 9	Merchants Cr Nonpriority Creditor's Name	Last 4 digits of account number	6275	\$995.00
	223 W. Jackson Blvd. Suite 400	When was the debt incurred?	Opened 8/01/14	
-	Chicago, IL 60606 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community debt	Student loans		
	ls the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Collection A Other. Specify Medical Sp	Attorney Illinois Emergency e	

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Debtor Debtor	1 Matthew Hendrix 2 Leslie Renee Hendrix		Case number (if know)	
4.2	Merchants Cr	Last 4 digits of account number	0426	\$808.00
	Nonpriority Creditor's Name 223 W. Jackson Blvd. Suite 400 Chicago, IL 60606	When was the debt incurred?	Opened 8/01/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Hospital	Attorney Adventist Hinsdale	
4.2	Merchants Cr Nonpriority Creditor's Name	Last 4 digits of account number	0536	\$541.00
	223 W. Jackson Blvd. Suite 400 Chicago, IL 60606	When was the debt incurred?	Opened 8/01/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify Collection Hospital	Attorney Adventist Hinsdale	
4.2	Natl Cty Crd  Nonpriority Creditor's Name	Last 4 digits of account number	6095	\$0.00
	K-a16-2j Kalamazoo, MI 49009	When was the debt incurred?	Opened 7/18/08 Last Active 2/13/09	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify NOTICE ON		
	* *	— Other openly		

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Debtor Debtor	1 Matthew Hendrix 2 Leslie Renee Hendrix		Case number (if know)	
4.2	Navy Fcu	Last 4 digits of account number	6586	\$3,698.00
	Nonpriority Creditor's Name Attention: Bankruptcy Po Box 3000 Merrifield, VA 22119 Number Street City State 7 in Code	When was the debt incurred?	Opened 10/01/10 Last Active 8/17/12	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2	Navy Fcu Nonpriority Creditor's Name	Last 4 digits of account number	1911	\$609.00
	Attention: Bankruptcy Po Box 3000 Merrifield, VA 22119	When was the debt incurred?	Opened 12/01/09 Last Active 12/16/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify Credit Card	<u> </u>	
4.2	Navy Federal Credit Union  Nonpriority Creditor's Name	Last 4 digits of account number	0901	\$27,000.00
	Po Box 3000 Merrifield, VA 22119	When was the debt incurred?	Opened 3/01/11 Last Active 6/15/12	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only ☐ Contingent			
	■ Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	_ '		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	o plans, and other similar debts	
			g plans, and other similar debts	
	Yes	Other. Specify Unsecured		

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Debtor 2 Leslie Renee Hendrix		Case number (if know)			
4.2	Niaga Caa		<b>\$005.00</b>		
6	Nicor Gas  Nonpriority Creditor's Name	Last 4 digits of account number	\$995.00		
	PO Box 2020	When was the debt incurred?			
	Aurora, IL 60507				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	П			
	Debtor 2 only	Contingent			
	_	Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other Specify Utility			
4.2 7	Portfolio Recovery  Nonpriority Creditor's Name	Last 4 digits of account number 0954	\$524.00		
	Attn: Bankruptcy	When was the debt incurred? Opened 10/01/14			
	Po Box 41067				
	Norfolk, VA 23541				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
		_ Factoring Company Account Capital One			
	Yes	Other. Specify Bank Usa N.A.			
4.2					
8	Premier Bank	Last 4 digits of account number	\$1,500.00		
	Nonpriority Creditor's Name PO Box 2208 Vacaville, CA 95696	When was the debt incurred?			
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify CREDIT CARD			

Debtor 1 Matthew Hendrix

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	2 Leslie Renee Hendrix		Case number (if know)	
4.2	State Collection Service	Last 4 digits of account number	9844	\$659.00
	Nonpriority Creditor's Name Po Box 6250 Madison, WI 53716	When was the debt incurred?	Opened 8/01/13	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No		☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Physician	Attorney Emergency Healthcare	
4.3	State Collection Service	Last 4 digits of account number	5879	\$498.00
	Nonpriority Creditor's Name Po Box 6250	When was the debt incurred?	Opened 10/01/13	
	Madison, WI 53716	when was the debt incurred:	Opened 10/01/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Collection Physician	Attorney Emergency Healthcare	
4.3	Turner Acceptance Crp	Last 4 digits of account number	5677	\$1,996.00
	Nonpriority Creditor's Name  5900 W Howard St Skokie, IL 60077	When was the debt incurred?	Opened 12/01/11 Last Active 11/23/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•		
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	

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	Leslie Renee Hendrix		Case number (if know)	
4.3	Unique National Collec	Last 4 digits of account number	0727	\$59.00
	Nonpriority Creditor's Name  119 E Maple St Jeffersonville, IN 47130	When was the debt incurred?	Opened 10/01/13 Last Active 2/03/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection Library	Attorney Midlothian Public	
4.3	Us Dept Ed  Nonpriority Creditor's Name	Last 4 digits of account number	0688	\$3,610.00
	Po Box 1030 Coraopolis, PA 15108	When was the debt incurred?	Opened 10/01/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		ıl		
4.3	Us Dept Ed  Nonpriority Creditor's Name	Last 4 digits of account number	7235	\$1,907.00
	Po Box 1030 Coraopolis, PA 15108	When was the debt incurred?	Opened 10/01/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify		

Debto		Filed 03/25/16 Entere Document Page 3		c Main		
Debto	or 2 Leslie Renee Hendrix		Case number (if know)			
4.3 5	Uscb Corporation	Last 4 digits of account number	9789	\$639.00		
	Nonpriority Creditor's Name 101 Harrison St Archbald, PA 18403	When was the debt incurred?	Opened 9/01/14			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify Collection Institute	Attorney Stratford Career			
4.3 6	Vision Financial Servi	Last 4 digits of account number	3222	\$1,197.00		
	Nonpriority Creditor's Name 1900 W Severs Rd La Porte, IN 46350	When was the debt incurred?	Opened 1/01/12			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Collection	Attorney Silver Cross Hospital			
4.3 7	Vision Financial Servi	Last 4 digits of account number	9304	\$525.00		
	Nonpriority Creditor's Name 1900 W Severs Rd La Porte, IN 46350	When was the debt incurred?	Opened 6/01/12			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:  ☐ Student loans				
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community					
	debt	Obligations arising out of a sens	ration agreement or divorce that you did not			

Part 3: List Others to Be Notified About a Debt That You Already Listed

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Collection Attorney Silver Cross Hospital

■ No

☐ Yes

report as priority claims

Is the claim subject to offset?

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Matthew Hendrix	Document P	age 31 of 60	
Debtor 2 Leslie Renee Hendrix		Case number (if know)	
Name and Address Adventist Hinsdale Hospital 120 N. Oak St. Attn: Legal Dept. Hinsdale, IL 60521	On which entry in Part 1 or Part Line <b>4.20</b> of ( <i>Check one</i> ):	rt 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account numbe	r	
Name and Address Adventist Hinsdale Hospital 120 N. Oak St.	On which entry in Part 1 or Part Line <b>4.21</b> of ( <i>Check one</i> ):	rt 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
Attn: Legal Dept. Hinsdale, IL 60521			
	Last 4 digits of account numbe	<u> </u>	
Name and Address  Capital One Bank	On which entry in Part 1 or Part Line <b>4.27</b> of (Check one):	rt 2 did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims	
PO Box 6492 Carol Stream, IL 60197-6492		Part 2: Creditors with Nonpriority Unsecured Claims	
Janon Januari, 12 30107 3102	Last 4 digits of account number	r	
Name and Address  Career Education Corp.	On which entry in Part 1 or Part Line <b>4.4</b> of ( <i>Check one</i> ):	rt 2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
231 N. Martingale Road Schaumburg, IL 60173		■ Part 2: Creditors with Nonpriority Unsecured Claims	
JonaaJ, 12 Jon 10	Last 4 digits of account number	r	
Name and Address Emergency Healthcare Physicians	On which entry in Part 1 or Part Line 4.29 of (Check one):	rt 2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 366 Hinsdale, IL 60522	Last 4 digits of account numbe	■ Part 2: Creditors with Nonpriority Unsecured Claims	
	<del>-</del>		
Name and Address Emergency Healthcare Physicians PO Box 366	On which entry in Part 1 or Part Line 4.30 of (Check one):	rt 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims	
Hinsdale, IL 60522		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account numbe	r 	
Name and Address Midloathian Public Library	On which entry in Part 1 or Part Line 4.32 of (Check one):	rt 2 did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims	
14701 S. Kenton Midlothian, IL 60445		■ Part 2: Creditors with Nonpriority Unsecured Claims	
,	Last 4 digits of account number	г	
Name and Address Silver Cross Hospital	On which entry in Part 1 or Part Line 4.36 of (Check one):	rt 2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 100 Joliet, IL 60434		■ Part 2: Creditors with Nonpriority Unsecured Claims	
30, 12 00 .0 .	Last 4 digits of account number	r	
Name and Address Silver Cross Hospital	On which entry in Part 1 or Part Line 4.37 of (Check one):	rt 2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 100 Joliet, IL 60434		■ Part 2: Creditors with Nonpriority Unsecured Claims	
ooner, in ootot	Last 4 digits of account number	r	
Name and Address Stratford Career Institute	On which entry in Part 1 or Part Line <b>4.35</b> of ( <i>Check one</i> ):	rt 2 did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims	
PO Box 1560	, , ,	Part 2: Creditors with Nonpriority Unsecured Claims	
Saint Albans, VT 05478	Last 4 digits of account numbe	r	
Name and Address	On which entry in Part 1 or Par	rt 2 did you list the original creditor?	_
Verizon Wireless 11601 Roosevelt Blvd.	Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Saint Petersburg, FL 33716		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account numbe	r	

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1	Matthew Hendrix	•	
Debtor 2	Leslie Renee Hendrix	Case number (if know)	

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	5,517.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	55,701.75
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	61,218.75
	6b. 6c. 6d. 6e. 6f. 6g. 6h.	<ul> <li>6b. Taxes and certain other debts you owe the government</li> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total Priority. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul>	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6a. Domestic support obligations  6a. \$  6b. Taxes and certain other debts you owe the government  6c. Claims for death or personal injury while you were intoxicated  6c. \$  6d. Other. Add all other priority unsecured claims. Write that amount here.  6d. \$  6e. Total Priority. Add lines 6a through 6d.  6f. Student loans  6f. \$  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  6h. Debts to pension or profit-sharing plans, and other similar debts  6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$

Fill in this infor	Fill in this information to identify your case:			
Debtor 1	Matthew Hendrix			
	First Name	Middle Name	Last Name	_
Debtor 2	Leslie Renee Her	ndrix		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

2.1 Donna Medufford 4843 W. Hutchinson Chicago, IL 60641

Residential month-to-month lease at \$900.00 per month

Fill in this	information to identify your	Document	Page 34 of	60	
Debtor 1	Matthew Hendrix				
	First Name	Middle Name	Last Name		
Debtor 2	Leslie Renee Hen		Last Name		
(Spouse if, filin	3,	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS		
Case numb (if known)	per			ι	☐ Check if this is an amended filing
	Form 106H				
<u>Sched</u>	ule H: Your Code	ebtors			12/15
people are fill it out, ar your name	are people or entities who ar filing together, both are equa nd number the entries in the and case number (if known). you have any codebtors? (if )	ally responsible for supplyi boxes on the left. Attach th Answer every question.	ng correct informatione Additional Page to	on. If more space is needed, on this page. On the top of any	copy the Additional Page,
■ No					
☐ Yes	1				
	nin the last 8 years, have you a, California, Idaho, Louisiana,				and territories include
	Go to line 3.  Did your spouse, former spou	se, or legal equivalent live w	ith you at the time?		
in line Form	umn 1, list all of your codebto 2 again as a codebtor only it 106D), Schedule E/F (Official olumn 2.	that person is a guarantor	or cosigner. Make su	ure you have listed the credit	tor on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZII	<sup>2</sup> Code		Column 2: The creditor to Check all schedules that ap	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐	
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
<del></del> -	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐	
ī	Number Street				

State

City

ZIP Code

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Fill in this information to	o identify your case:	
Debtor 1	Matthew Hendrix	
Debtor 2 (Spouse, if filing)	Leslie Renee Hendrix	
United States Bankrupt	ccy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (If known)		Check if this is:  An amended filing  A supplement showing postpetition chapter
		13 income as of the following date:
Official Form	<u>106l</u>	MM / DD/ YYYY
Schedule I: `	Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
	employers.	Occupation	Driver	
	Include part-time, seasonal, or self-employed work.	Employer's name	Bear Cartage	
	Occupation may include student or homemaker, if it applies.	Employer's address	8600 Joliet Road McCook, IL 60525-3154	
		How long employed the	nere? 3 years	
Par	t 2: Give Details About Mon	thly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			nor	non-filing spouse							
2.	\$	4,219.00	\$_	0.00							
3.	+\$	0.00	+\$	0.00							
4.	\$	4,219.00	\$	0.00							

For Debtor 2 or

For Debtor 1

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Debtor 1 Debtor 2		Matthew Hendrix Leslie Renee Hendrix	_		Case	ase number (if known)							
					For Debtor 1					Debtor -filing s			
	Cop	by line 4 here	4.		\$_	4,219	9.0	)	\$			0.00	
5.	List	all payroll deductions:											
٥.	5a.	Tax, Medicare, and Social Security deductions	5a	,	\$	024	2 0	^	\$			0 00	
	5a. 5b.	Mandatory contributions for retirement plans	5b		φ_ \$	833		_	\$			0.00	
	5c.	Voluntary contributions for retirement plans	50		\$ _		0.0 0.0	_	φ			0.00	
	5d.	Required repayments of retirement fund loans	50		\$-		0.0	_	\$ _			0.00	
	5e.	Insurance	5e		\$-		0.0	_	ς \$			0.00	
	5f.	Domestic support obligations	5f		\$-		0.0	_	<u>\$</u> -			0.00	
	5g.	Union dues	5 <u>0</u>		\$		0.0		<u>\$</u> -			0.00	
	5h.	Other deductions. Specify: loan repayment	-	).+	\$		7.0		+ \$-			0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	920	0.0	_ D	\$			0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,299	9.0	)	\$			0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	<b>a</b> .	\$		0.0	n	\$			0.00	
	8b.	Interest and dividends	8t		\$		0.0	_	\$_			0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 80	<b>.</b>	\$		0.0		\$			0.00	
	8d.	Unemployment compensation	80		\$		0.0	_	\$_			0.00	
	8e.	Social Security	86	€.	\$		0.0	_	\$_			0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_		0.0	_	\$			0.00	
	8g.	Pension or retirement income	80	_	\$_		0.0	_	. <u>*</u> —			0.00	
	8h.	Other monthly income. Specify: Son's SSI	8r	1.+	\$_	488	3.6		+ \$_			0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	488	3.6	7	\$_			0.00	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		3,787.67	_[	\$		0.00	_[	\$	3,787.67
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		3,707.07		Ψ_		0.00		<b>–</b>	3,707.07
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe							Schedule 11.		\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reserve that amount on the Summary of Schedules and Statistical Summary of Certailies								. 12.	\$		3,787.67
												mbin	
13.	Do :	you expect an increase or decrease within the year after you file this form	?								me	onthly	income
		No.											
		Yes. Explain:											

Fill	in this informa	ition to identify yo	our case:			I		
	otor 1	Matthew Her				Chec	ck if this is:	
		matthew rich	IGITA				An amended filing	
	otor 2 ouse, if filing)	Leslie Renee	Hendrix				A supplement show 13 expenses as of	ving postpetition chapter the following date:
						_		
Unit	ed States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	ises				12/1
Be info	as complete ormation. If m	and accurate as	possible eded, atta	If two married people ar ch another sheet to this				
Par		ribe Your House	hold					
1.	Is this a joir  ☐ No. Go to							
	_	s Debtor 2 live i	in a separ	ate household?				
	. 00. <b>2</b> 0							
		-	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Deb	tor 2.	
2.	Do vou have	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				Son		2	□ No ■ Yes
					Son		6	□ No
					3011			■ Yes □ No
								☐ Yes
								□ No
3.	Do vour ext	enses include	_	Ma			_	☐ Yes
	expenses o	f people other to d your depende	han $_{m \Box}$	No Yes				
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp	imate your ex	cpenses as of yo	our bankr	uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> )			Your exp	enses
(0.		,01.,						
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4. \$	·	900.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	;	0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
		-	•	ipkeep expenses		4c. \$		0.00
5.		owner's associat		oominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00

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Debtor '	1 Matthew Hendrix		
ebtor 2	Leslie Renee Hendrix	Case number (if known)	
1 14:	ilities:		
6. <b>Uti</b> 6a.		6a. <b>\$</b>	300.00
6b.		6b. \$	0.00
6c.		·	300.00
6d.		6d. \$	0.00
	od and housekeeping supplies		600.00
	nildcare and children's education costs	8. \$	
_	othing, laundry, and dry cleaning	9. \$	0.00 300.00
	ersonal care products and services	10. \$	
	edical and dental expenses	11. \$	200.00
	ansportation. Include gas, maintenance, bus or train fare.	·	100.00
	o not include car payments.	12. \$	400.00
	ntertainment, clubs, recreation, newspapers, magazine	·	100.00
	naritable contributions and religious donations	14. \$	0.00
	surance.	· ··· 🗸	0.00
	o not include insurance deducted from your pay or included	in lines 4 or 20.	
	a. Life insurance	15a. \$	0.00
151	b. Health insurance	15b. \$	0.00
150	c. Vehicle insurance	15c. \$	165.00
150	d. Other insurance. Specify:	15d. \$	0.00
	xes. Do not include taxes deducted from your pay or include	ded in lines 4 or 20.	
	ecify:	16. \$	0.00
7. Ins	stallment or lease payments:		
178	a. Car payments for Vehicle 1	17a. \$	390.00
17	b. Car payments for Vehicle 2	17b. \$	0.00
170	c. Other. Specify:	17c. \$	0.00
170	d. Other. Specify:	17d. \$	0.00
3. <b>Yo</b>	our payments of alimony, maintenance, and support that	at you did not report as	
de	ducted from your pay on line 5, Schedule I, Your Incom	ne (Official Form 106I). 18. \$	0.00
	her payments you make to support others who do not	live with you.	0.00
	ecify:	19.	
	her real property expenses not included in lines 4 or 5		
	a. Mortgages on other property	20a. \$	0.00
	b. Real estate taxes	20b. \$	0.00
	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	e. Homeowner's association or condominium dues	20e. \$	0.00
1. <b>O</b> tl	her: Specify:	21+\$	0.00
2 <b>C</b> 2	lculate your monthly expenses		
	a. Add lines 4 through 21.	\$	3,755.00
	<ul><li>b. Copy line 22 (monthly expenses for Debtor 2), if any, fro</li></ul>		3,733.00
220	c. Add line 22a and 22b. The result is your monthly expen-	ses. \$	3,755.00
3. <b>Ca</b>	Ilculate your monthly net income.		
	a. Copy line 12 (your combined monthly income) from Sci	hedule I. 23a. \$	3,787.67
	b. Copy your monthly expenses from line 22c above.	23b\$	3,755.00
-	,,,	•	
230	c. Subtract your monthly expenses from your monthly inc	ome.	
	The result is your monthly net income.	23c. \$	32.67
	, ,		
	you expect an increase or decrease in your expenses		
	r example, do you expect to finish paying for your car loan within the diffication to the terms of your mortgage?	e year or do you expect your mortgage payment to increas	e or decrease because of a
	, , ,		
	No.		
	Yes. Explain here:		

Fill in this infor			
Debtor 1	Matthew Hendrix First Name	Middle Name Last Name	
Debtor 2	Leslie Renee Hei		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS	
Case number			
(if known)			☐ Check if this is an amended filing
Official For		an Individual Debtor's Schedul	00
Jeciaiai	Holl About a	in marviduai Debioi 3 Schedui	<b>es</b> 12/15
Sig	n Below		
Did you pa	y or agree to pay some	eone who is NOT an attorney to help you fill out bankruptcy f	forms?
■ No			
☐ Yes. I	Name of person		tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the summary and schedules filed with this c	declaration and
that they ar		that I have read the summary and schedules filed with this of the summary and schedules filed with the sch	
that they ar	e true and correct.	·	drix
that they ar  X /s/ Mat  Matthe	e true and correct. tthew Hendrix	X _/s/ Leslie Renee Hend	drix

Fill in this information to identify your case:  Debtor 1 Matthew Hendrix	
Dehtor 1 Matthew Hendrix	
First Name Middle Name Last Name	
Debtor 2 Leslie Renee Hendrix	
(Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number	
	neck if this is an nended filing
Official Form 107	
Statement of Financial Affairs for Individuals Filing for Bankruptcy	12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for suppl information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your	
number (if known). Answer every question.	
Part 1: Give Details About Your Marital Status and Where You Lived Before	
1. What is your current marital status?	
■ Married □ Not married	
2. During the last 3 years, have you lived anywhere other than where you live now?	
■ No	
Yes. List all of the places you lived in the last 3 years. Do not include where you live now.	
Debtor 1 Prior Address:  Dates Debtor 1 Debtor 2 Prior Address:  lived there	Dates Debtor 2 lived there
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?	? (Community property
states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wis	sconsin.)
■ No	
Yes. Make sure you fill out <i>Schedule H: Your Codebtors</i> (Official Form 106H).	
Part 2 Explain the Sources of Your Income	
4. Did you have any income from employment or from operating a business during this year or the two previous calend Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.	lar years?
□ No	
Yes. Fill in the details.	
Debtor 1 Debtor 2	
Sources of income Gross income Sources of income	Gross income (before deductions
Check all that apply. (before deductions and exclusions)  Check all that apply.	and exclusions)
Check all that apply. (before deductions and Check all that apply.	\$0.00

Official Form 107

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Debtor 2 Leslie Renee Hendrix Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$51,633.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$44,935.00 \$0.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Describe below. (before deductions Describe below... and exclusions) exclusions) From January 1 of current year until Son's SSI \$1,466.01 the date you filed for bankruptcy: For last calendar year: Son's SSI \$5,864.04 (January 1 to December 31, 2015) For the calendar year before that: Son's SSI \$5,864.04 (January 1 to December 31, 2014) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Amount you Was this payment for ... Dates of payment Total amount paid still owe

Debtor 1

**Matthew Hendrix** 

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	btor 1 btor 2	Matthew Hendrix Leslie Renee Hendrix	Document	Cas	se number (if know)	n)	
7.	<i>Inside</i> of wh	in 1 year before you filed for bankrupters include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners; relatives of any control, or owner of 20	general partners; partners; partners of their votin	erships of which y g securities; and	ou are a genera any managing a	al partner; corporation gent, including one fo
	_	No Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insid	n 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos		payments or transfer	any property on	account of a d	ebt that benefited an
	_	No Yes. List all payments to an insider					
	_	der's Name and Address	Dates of payment	Total amount	Amount you		this payment
				paid	still owe	Include cred	itor's name
Pai	rt 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	List a modif	in 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes.  No Yes. Fill in the details.					
		e title	Nature of the case	Court or agency	,	Status of th	e case
	Case	e number					
10.		n 1 year before you filed for bankrupt k all that apply and fill in the details belo		roperty repossessed,	foreclosed, garn	ished, attached	d, seized, or levied?
		No					
		Yes. Fill in the information below.			_		
	Crec	litor Name and Address	Describe the Prope Explain what happ	•	Date	9	Value of the property
11.	acco	in 90 days before you filed for bankru unts or refuse to make a payment bed			nancial institutio	on, set off any a	amounts from your
	_	No Yes. Fill in the details.					
		litor Name and Address	Describe the action	n the creditor took	Dat take	e action was	Amount
12.		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		roperty in the possess	sion of an assign	ee for the bene	efit of creditors, a
		No					
		Yes					
Pai	rt 5:	List Certain Gifts and Contributions					
13.	_	n 2 years before you filed for bankrup	otcy, did you give any	gifts with a total value	of more than \$6	00 per person	?
		Yes. Fill in the details for each gift.					
	Gifts	s with a total value of more than \$600 person	Describe the g	gifts		es you gave gifts	Value
		son to Whom You Gave the Gift and ress:					

Case 16-10366 Doc 1 Filed 03/25/16 Entered 03/25/16 15:32:07 Desc Main Page 43 of 60 Document Debtor 1 **Matthew Hendrix** Debtor 2 Leslie Renee Hendrix Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Ledford, Wu & Borges, LLC \$1273.00 total fees paid for Attorney's 2012-2016 \$1,273.00 105 West Madison 23rd Floor Chicago, IL 60602 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο п Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of payment Address transferred or transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. П Yes. Fill in the details. Person Who Received Transfer Description and value of

Person's relationship to you

property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Address

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Debtor 1 Matthew Hendrix
Debtor 2 Leslie Renee Hendrix

Case number (if known)

19.	beneficiary? (These are often called asset-protect		y property to a	a seit-settie	a trust or similar device (	or wnich you are a		
	Yes. Fill in the details.							
	Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and S	torage Unit	s			
20.	Within 1 year before you filed for bankruptcy, visold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associate	other financial accour	nts; certificate	s of deposi				
	■ No □ Yes, Fill in the details.							
	Name of Financial Institution and La	ast 4 digits of ccount number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	any safe de <sub>l</sub>	posit box or other deposi	tory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accommodate Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Control for	r Someone Else						
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ide any prope	rty you bor	rowed from, are storing f	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	the property	Value		
	t 10: Give Details About Environmental Inform							
_								
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface	water, groun	• .	•			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		environmental	law, wheth	er you now own, operate	, or utilize it or used		
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		as a hazardou	s waste, ha	zardous substance, toxic	substance,		

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Matthew Hendrix
Debtor 2 Leslie Renee Hendrix

Case number (if known)

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	·				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adminis	strative proceeding under any envir	onmental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	t11: Give Details About Your Business or Con	nnections to Any Business				
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have any	of the following connections to any	business?		
	lacksquare A sole proprietor or self-employed in a $f r$	trade, profession, or other activity, e	either full-time or part-time			
	☐ A member of a limited liability company	(LLC) or limited liability partnership	(LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing execut	tive of a corporation				
	☐ An owner of at least 5% of the voting or	equity securities of a corporation				
	■ No. None of the above applies. Go to Part	12.				
	☐ Yes. Check all that apply above and fill in t	the details below for each business.				
		escribe the nature of the business	Employer Identification number			
	Address (Number, Street, City, State and ZIP Code)	ame of accountant or bookkeeper	Dates business existed	Do not include Social Security number or ITIN.  Dates business existed		
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.					
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued				
	,					

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Debto	or 1 Matthew Hendrix		_	
Debto	Leslie Renee Hendrix		Case number (if known	n)
Part 1	2: Sign Below			
	read the answers on this Statement of Financi		,	, , , ,
	re and correct. I understand that making a false bankruptcy case can result in fines up to \$250			or property by fraud in connection
	5.C. §§ 152, 1341, 1519, and 3571.	,000, 01 1111	risoninent for up to 20 years, or both.	
10 0.0	.o. 33 102, 1041, 1019, and 3071.			
/s/ M	atthew Hendrix	/s/ Le	slie Renee Hendrix	
Matti	new Hendrix	Leslie	Renee Hendrix	•
Signature of Debtor 1		Signature of Debtor 2		
Date	March 16, 2016	Date	March 16, 2016	
Did yo	ou attach additional pages to Your Statement o	f Financial .	Affairs for Individuals Filing for Bankruptcy	(Official Form 107)?
■ No	, •			,
☐ Yes	3			
Did vo	ou pay or agree to pay someone who is not an a	attorney to	nelp you fill out bankruptcy forms?	
■ No	- p., -:			
☐ Yes	s. Name of Person Attach the Bankruptcy	Petition Pre	parer's Notice, Declaration, and Signature (Offi	icial Form 119).

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Fill in this inform	nation to identify your	case:				
Debtor 1	Matthew Hendrix	34001				
Debtor 1	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	Leslie Renee Hen	drix Middle Name		Last Name		
United States Bar	kruptcy Court for the:	NORTHERN DIS	STRICT OF ILLIN	NOIS		
Case number						
(if known)						☐ Check if this is an amended filing
Official For	rm 108					
Statemen	t of Intentio	n for Indiv	viduals l	Filing Under C	hapter 7	12/15
If you are an indiv	vidual filing under cha	oter 7, you must fi	fill out this form	if:		
	claims secured by yo	=				
You must file this	er is earlier, unless th	ithin 30 days after	er you file your b	oankruptcy petition or by the se. You must also send co		
	ople are filing together	in a joint case, bo	oth are equally	responsible for supplying	correct inform	ation. Both debtors must
			is needed, attac	ch a separate sheet to this	form. On the to	op of any additional pages,
write yo	ur name and case nun	nber (if known).				
Part 1: List Yo	ur Creditors Who Have	Secured Claims	1			
•	-	art 1 of Schedule I	D: Creditors Wh	no Have Claims Secured by	y Property (Offi	icial Form 106D), fill in the
information be Identify the cre	low. ditor and the property t	nat is collateral	What do you	u intend to do with the pro ebt?	perty that	Did you claim the property as exempt on Schedule C?
Creditor's Tu	ırner Acceptance		■ Surrende	r the property.		□No
name:				ne property and redeem it.		_
Description of	2004 Dodge Carav	an 176000		e property and enter into a ation Agreement.		Yes
property	miles	all 170000		e property and [explain]:		
securing debt:	Average Trade-in v	alue per				
Part 2: List Vo	ur Unevnired Persona	I Property I eases	•			
Part 2: List Your Unexpired Personal Property Leases  For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).						
Describe your ur	nexpired personal prop	perty leases			Will	the lease be assumed?
Lessor's name:	Donna Meduff	ord				No
					■、	Yes
Description of lease Property:	sed Residential mo	onth-to-month le	ease at \$900.0	00 per month		
. 10001.51						

Official Form 108

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Deb	tor 1	Matthew Hendrix	
Deb	tor 2	Leslie Renee Hendrix	Case number (if known)
Part	3:	Sign Below	
			cated my intention about any property of my estate that secures a debt and any personal
	erty tl	nalty of perjury, I declare that I have indica hat is subject to an unexpired lease. Matthew Hendrix	cated my intention about any property of my estate that secures a debt and any personal  X /s/ Leslie Renee Hendrix
prop	erty tl	hat is subject to an unexpired lease.	
prop	erty tl /s/ N Matt	hat is subject to an unexpired lease. Natthew Hendrix	X /s/ Leslie Renee Hendrix

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-10366 Doc 1 Filed 03/25/16 Entered 03/25/16 15:32:07 Desc Main Document Page 53 of 60

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Northern District of Illinois

In re	Matthew Hendrix Leslie Renee Hendrix		Case No	) <b>.</b>	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	1,273.00	
	Prior to the filing of this statement I have received			1,273.00	
	Balance Due			0.00	
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are me	mbers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	<ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credito</li> <li>d. [Other provisions as needed]</li> <li>Exemption planning; preparation and filing and filing of motions pursuant to 11 USC</li> </ul>	ement of affairs and plan which ors and confirmation hearing, a sing of reaffirmation agree	ch may be required; and any adjourned h ements and applic	earings thereof;	
	OR Notwithstanding the preceding paragrap covers the preparation and filing of the p		ed herein		
7.	By agreement with the debtor(s), the above-disclosed fee	e does not include the following	ng service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	y agreement or arrangement fo	or payment to me for	representation of the	debtor(s) in
N	March 16, 2016	/s/ Elyssa M Pav	one ARDC #		
	Date	Elyssa M Pavon	e ARDC # 631370	)1	
		Signature of Attorn			
		Ledford, Wu & E 105 W. Madison			
		23rd Floor			
		Chicago, IL 606			
		312-853-0200 F	ax: 312-873-4693		

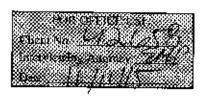
notice@billbusters.com

Name of law firm

#### LEDFORD, WU & BORGES, LLC

105 W. Madison. 23<sup>rd</sup> Floor, Chicago. IL 60602 (312)853-0200 Fax: (312)873-4693

#### CONSULTATION AGREEMENT



### THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include fifing bankruptey. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- 4. Services: The attorney agrees to provide Client with the following services:
  - a. analyzing Client's financial circumstances based on information provided by Client;
  - b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
  - if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's
    options, informing Client what additional information Client needs to provide in order to enable Attorney to
    provide such advice and information;
  - d. where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and

	to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client
5. Fee	check one):
$\checkmark$	es (check one):  A consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-client relationship shall terminate at the conclusion of the interview
	Client agrees to pay Sin nonrefundable consultation fee
In the	event Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged

In the event Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged for the case, and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed by Client and Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed explanation of the parties' obligations and a breakdown of the costs.

**6. Acknowledgement:** Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to Client is the date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure and information mandated by Section 527(b) of the Bankruptcy Code.

Attorney Signature:

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Date: ) 1/5 /

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105 W. Madison, 23rd Floor, Chicago, 11, 60602

## ATTORNEY HETEN 40 NO CONTRACT

Responsible attornes

(312)853-0200 Fax: (312)873-4693 1. Parties. In this contract, "Client" means the undersigned, both individually and jointly: "Attorney" means the law firm of Ledford & Wu and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of any inconsistency. Services and Fees: Client retains Attorney for the following services: ☐ Chapter 7 (prepetition service only): \$\_\_\_ PLUS \$335 filing fee (court cost) Client retains Attorney for the sole purpose of preparing and filing a Chapter 7 bankruptcy petition (without the required summary, schedules and statements). Attorney's duty to further counsel and represent Client ends, and the attorney-client relationship is terminated, at the end of the first week after commencement of the case, unless the parties enter into a separate retention contract for postpetition services within that period. If no such contract is executed, Attorney may file a motion to withdraw from the case, Chapter 7 (service through discharge): S 1 273.00 PLUS \$335 filing fee (court cost) TOTAL: S 1008.00 less retainer received: S 1145.00 Pec balance: \$ 463.00 To be paid by: The legal fee is an 🗖 advance payment retainer 🗖 security retainer 🗖 classic retainer, and is a flat fee unless otherwise stated. Attorney is unable to represent Client without receiving an advance payment retainer since a security retainer will be within the reach of Client's creditors. Should hourly billing be necessary, Attorney's billing rates are \$300-\$350/bour for senior partners, \$250/hour for junior partners and associates, and S90/hour for law clerks. The filing fee and expenses are subject to change at any time. The billing rates are subject to an annual review and potential increase every calendar year. The legal fee covers the initial consultation and all subsequent work. All fees required in this section are to be paid in full before filing. The case may be closed if the fees are not paid by the deadline. Additional legal fees and court costs may apply, and a separate contract may be required, in the event of conversion from one chapter to another, amending a petition, list, schedule or statement post-filing not due to Attorney's fault, attending additional creditors' meetings, reopening of a closed case, unnecessary work caused by Client's delay, or any other fact not known to Attorney in writing at the time of the initial consultation that complicates the case. NSF checks will be assessed a \$20 fee. Scope of Representation: (a) Attorney will counsel and represent Client in all aspects of the above matter(s) EXCEPT: (1) adversary proceedings: (2) § 722 redemption; (3) judicial lien avoidance; (4) post-discharge litigation; (5) appeals; (6) other: (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed upon separately by the parties. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial): M H The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2 The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures The difference among various types of retainer and that Client has made the choice identified in Paragraph 4 TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or otherwise adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested documents and/or information, including but not limited to a certificate of credit counseling, are received by Attorney Other (specify); may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed. 5. Client's Duties. Client agrees, during the course of representation, to: (a) provide Attorney with full, accurate and timely information, financial and otherwise; (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents;

Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and

- (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty;
- (d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or line of credit, or using an existing credit card or line of credit; and
- (e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.
- 6. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ one or more of the following outside counsel, at Attorney's expense, to work on this case: Kathleen W. Vaught, Kelly M. Johnson, Wayne J. Skelfon. Christina Banyon, David Hall Carter, and
- 7. Termination. Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Autorney's property upon receipt, and is nonrefundable upon filling of the polition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300. Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and Client authorizes Attorney to apply the filing

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Attorney signature:	ARDC# 12515 601			
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## United States Bankruptcy Court Northern District of Illinois

In re	Matthew Hendrix		Case No.		
III IC	Leslie Renee Hendrix	Debtor(s)	Chapter	7	_
	VI	ERIFICATION OF CREDITOR I	MATRIX		
		Number o	of Creditors:	3	39
	The above-named Debtor(s (our) knowledge.	) hereby verifies that the list of cred	litors is true and	correct to the best of my	У
Date:	March 16, 2016	/s/ Matthew Hendrix			
		Matthew Hendrix Signature of Debtor			

1st Loan Financial 12601 S. Western Avenue Blue Island, IL 60406

Adventist Hinsdale Hospital 120 N. Oak St. Attn: Legal Dept. Hinsdale, IL 60521

Alliant Credit P.O. box 60050 City Of Industry, CA 91716

American Web Loan 210 Johngleen Dr. St. 14 Buffalo, NY 14228

Argent Healthcare Financial Services/Fir Attn: Bankruptcy 7715 Nw 48th Street; Ste 100 Doral, FL 33166

AT&T PO Box 806 Norwell, MA 02061-0806

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Bank PO Box 6492 Carol Stream, IL 60197-6492

Career Education Corp. 231 N. Martingale Road Schaumburg, IL 60173

Central Credit Service 9550 Regency Square Blvd Jacksonville, FL 32225 Charter Fitness 4743 W. 95th Street Oak Lawn, IL 60453

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Check & Go 18240 Kedzie Hazel Crest, IL 60429

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

Emergency Healthcare Physicians PO Box 366 Hinsdale, IL 60522

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

IC Systems, Inc 444 Highway 96 East Po Box 64378 St Paul, MN 55164

Illinois Collection Se 8231 185th St Ste 100 Tinley Park, IL 60487

IST Loan 12601 Western Ave Blue Island, IL 60406 Jefferson Capital Systems, LLC 16 Mcleland Rd Saint Cloud, MN 56303

Merchants Cr 223 W. Jackson Blvd. Suite 400 Chicago, IL 60606

Midloathian Public Library 14701 S. Kenton Midlothian, IL 60445

Natl Cty Crd K-a16-2j Kalamazoo, MI 49009

Navy Fcu Attention: Bankruptcy Po Box 3000 Merrifield, VA 22119

Navy Federal Credit Union Po Box 3000 Merrifield, VA 22119

Nicor Gas PO Box 2020 Aurora, IL 60507

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Premier Bank PO Box 2208 Vacaville, CA 95696

Silver Cross Hospital P.O. Box 100 Joliet, IL 60434

State Collection Service Po Box 6250 Madison, WI 53716

Stratford Career Institute PO Box 1560 Saint Albans, VT 05478

Turner Acceptance 4450 N. Western Ave,. Chicago, IL 60625

Turner Acceptance Crp 5900 W Howard St Skokie, IL 60077

Unique National Collec 119 E Maple St Jeffersonville, IN 47130

Us Dept Ed Po Box 1030 Coraopolis, PA 15108

Uscb Corporation 101 Harrison St Archbald, PA 18403

Verizon Wireless 11601 Roosevelt Blvd. Saint Petersburg, FL 33716

Vision Financial Servi 1900 W Severs Rd La Porte, IN 46350